## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

APPLICATION

SERIAL NO.

1058493/
APPLICANT(S)

26 OCT 2007

**CLAIMS** 

	AS FILED		AFTER 1"AMENDMENT		AFTER 2 ™AMENDMENT				AS FILED		AFTER 1"AMENDMENT		AFTER 2 MAMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1								51						
2								52						÷
3								-53						
4		-/-						54 55						
<u>5</u>		-						56						
7		/_	-					57						
8	·	/						58	· · · · · ·					
9		1						59						
10								60						
11								61						
12								62						
13								63						
14								64						
15								65						
16								66						
17								67						
18 19								68 69						
20								70						
21		C						71		-				
22								72						
23							o .	73						:
24							1	74						
25								75						
26								76						
27								77						
28								78						
29								79						
30								80						
31								81						
32							1 1	82 83						
33 34							1	84						
35							1	85	<del></del>					
36							1 1	86				<b></b>		
37							1	87						
38								88						
39								89					<u> </u>	
40			T. Comment					90						
41								91						
42								92						<u> </u>
43								93						
44							1.	94	10.11					
45								95						-
46				<b></b>	<del>                                     </del>			96	ļ					
47		<del></del>	-		<b>—</b>			97 98	<del></del>	<u> </u>				ļ
48								99				<b></b>		
50					4			100						
TOTAL	/			I		I		TOTAL		I		ı		I
IND. TOTAL	<u>/</u>	」,▼		」 ▼		」 ▼		IND. TOTAL		<b>」</b> ▼		J 🔻		<b>▼</b>
DEP.	8	<b>(=</b>		•		<b>(-</b>		DEP.		<b>(=</b>		-		-
TOTAL CLAIMS	9.							TOTAL CLAIMS						